

Argus Orthopaedic Zone

Arthritis of the Shoulder

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In last week's article about treatment of painful shoulders, I closed by saying arthritis of the shoulder needed its own "class". Well, here it is, ready or not!

I have found that most of my patients describe anything that hurts around a joint as "arthritis". That is very generic and often incorrect. I look at arthritis in a joint as being something very specific. It means a definite wearing away of the joint surface, which can be seen on x-rays, either plain films or special studies like MRI or CT in some cases.

In the shoulder, true arthritis of the ball and socket is actually pretty unusual compared to the knee or hip.

By the way, MRI or CT is almost never needed to diagnose arthritis of the shoulder. Plain x-rays almost always make the diagnosis. So I always want a patient to have plain x-rays first before I order an MRI. If I see arthritis on plain films, the patient doesn't need an MRI. It would be a wasted test.

Mild Arthritis

When I do see shoulder arthritis and it is mild I might choose to also arrange an arthrogram or MRI study to rule out other pathology that could be causing more symptoms than the arthritis. In moderate to severe arthritis the MRI adds nothing to the diagnosis and should not be done.

For treatment I might suggest Motrin or Advil. I might also recommend Osteo-Bi-Flex (a glucosamine joint supplement). Stretching and strengthening exercises taught by a Physical Therapy facility can also help.

Moderate Arthritis

Same as for mild arthritis. Plus I could use a shoulder injection with Kenalog or Celestone (anti-inflammatory steroid medication). We have also used Euflexxa, a pain relieving lubrication substance, given in a series of 3 injections one week apart in the office with x-ray guidance.

Advanced or Severe Arthritis

Physical therapy is generally not used as it makes the person hurt more.

Kenalog or Celestone (cortisone like) medication could be injected two or three times per year. Euflexxa probably wouldn't help advanced arthritis, but I might try one series of three injections if the patient wanted to do that.

The last stop is a total shoulder replacement. It is a big operation. It is like its big older brothers, total hip and total knee. In someone with severe pain it can relieve a lot of the pain. Don't, however, expect a result as good as a hip replacement.

Bottom Line

If your shoulder hurts it probably isn't true arthritis, fortunately. There are so many other more common conditions that cause shoulder pain. But if it continues, it should be checked out thoroughly so it can be properly treated.

For more information about the shoulder and things I treat in the office and hospital log on to our teaching website www.orthopodsurgeon.com /Your Orthopaedic Connection.

Our goal is simple - To help people return to more pain free, functional lives.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush